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** CONTINUING DATA ***** *✓ G.V.*

** FOREIGN APPLICATIONS ***** *✓ G.V.*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED *✓ G.V.*
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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance
Verified and Acknowledged	<i>G.V.</i>
Examiner's Signature	Initials

ADDRESS
32864

TITLE

COMMON MESSAGE AREA FOR A CUSTOMER INTERACTION CENTER USER INTERFACE

FILING FEE RECEIVED 1058	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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